

Report is due on the 20th day following the end of the Quarter. Civil penalty starts at \$200.00 for late filed, incomplete, or false reports.

1st Quarter 2nd Quarter 3rd Quarter 4th Quarter/Annual

Year _____ Permit Number _____

Business Name _____

Address _____

City _____ State _____ Zip _____

E-mail _____

Brand specific manufacturer information for actual amount of product sold in Iowa

Include all purchases of all brands of cigarettes, including little cigars and roll-your-own tobacco products sold in Iowa. This includes brands of signatories of the Master Settlement Agreement (Participating Manufacturers) and brands of all Non-Participating Manufacturers (NPM). Select only one type of product per page: cigarettes, little cigars or roll-your-own products. Identify this at the top of each page. Circle either (O) Original Participating, (S) Subsequent Participating or (N) Non-Participating for each manufacturer.

Brand Names: List only one entry for all types of the same brand. Do not split out into Lights, Kings, 100's, Menthol, etc., for each brand.

Note: One total per brand per quarter is needed to be considered as complete. Incomplete reports will be sent back to the distributor for completion.

Select type of product listed on this page (select only one):

Cigarettes Little Cigars Roll-Your-Own
None - No Iowa Purchases or Sales of the above three products

Purchased from	Street Address, City, State, Zip	Manufacturer if Different than Purchase from	Type of Manufacturer	Brand	Number of Sticks or Ounces with IA Tax Paid
			O / S / N		
			O / S / N		
			O / S / N		
			O / S / N		

More spaces are available on page two.

Distributor Signature _____ Phone Number _____

Prepared by _____ Date _____

Send form to:

Mailing Address:
Iowa Department of Revenue
Tax Management Division
PO Box 10472
Des Moines IA 50306-0472

OR
Delivery Address:
Iowa Department of Revenue
Hoover Bldg., Cigarette Tax
1305 E Walnut
Des Moines IA 50319

Questions:

Call 515-281-6134 or email: IDRCigarette@iowa.gov

